

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor	Leonard S. Schultz	
Appln. No.	09/673,406	
Filing Date	October 17, 2000	Group Art Unit: Not Yet Known
Title	EVACUATOR	Examiner: Not Yet Known

DECLARATION FOR UTILITY PATENT APPLICATION
(37 C.F.R. § 1.63)

As a below named inventor, I hereby declare that my mailing address and citizenship are as stated below.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

EVACUATOR

the specification of which:

is attached hereto OR
 was filed on October 17, 2000 as United States Application Number 09/673,406 or PCT International Application Number and amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information known to me that is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
PCT/US99/08207	PCT	04/15/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/082,125	04/17/1988

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PLEASE DIRECT ALL CORRESPONDENCE TO:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Sole or First Inventor:													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Given Name (First and middle)</td> <td style="width: 50%;">Family Name or Surname</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>LEONARD S.</u></td> </tr> <tr> <td>Inventor's Signature</td> <td>Date: <u>22 Feb 02</u></td> </tr> <tr> <td>Residence</td> <td>Citizenship: United States of America</td> </tr> <tr> <td>City: Bloomington</td> <td>State: Minnesota Zip: 55438</td> </tr> <tr> <td colspan="2">Post Office Address 11036 Boone Circle South Bloomington, Minnesota 55438</td> </tr> </table>		Given Name (First and middle)	Family Name or Surname	<u>LEONARD S.</u>		Inventor's Signature	Date: <u>22 Feb 02</u>	Residence	Citizenship: United States of America	City: Bloomington	State: Minnesota Zip: 55438	Post Office Address 11036 Boone Circle South Bloomington, Minnesota 55438	
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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Given Name (First and middle)</td> <td style="width: 50%;">Family Name or Surname</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>JEFFREY K.</u></td> </tr> <tr> <td>Inventor's Signature</td> <td>Date: <u>20 Feb 2002</u></td> </tr> <tr> <td>Residence</td> <td>Citizenship: United States of America</td> </tr> <tr> <td>City: Minneapolis</td> <td>State: Minnesota Zip: 55410</td> </tr> <tr> <td colspan="2">Post Office Address 5117 Washburn Avenue South Minneapolis, Minnesota 55410</td> </tr> </table>		Given Name (First and middle)	Family Name or Surname	<u>JEFFREY K.</u>		Inventor's Signature	Date: <u>20 Feb 2002</u>	Residence	Citizenship: United States of America	City: Minneapolis	State: Minnesota Zip: 55410	Post Office Address 5117 Washburn Avenue South Minneapolis, Minnesota 55410	
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